



DHMH

Maryland Department of Health and Mental Hygiene

Larry Hogan, Governor – Boyd K. Rutherford, Lt. Governor – Van T. Mitchell, Secretary

Maryland Board of Morticians and Funeral Directors

RENEWAL INSTRUCTIONS FOR MORTUARY TRANSPORT SERVICE

Note: Postmarked No Later Than September 30, 2016
A late fee of 400.00 will be assessed after October 15, 2016
****No Hand Deliveries Accepted****

This is your renewal notice for the October 1, 2016 through September 30, 2018 permitting period. Please print the application from the Board's website at dhmh.maryland.gov/bom under "Board News".

Please carefully print the name and address of the mortuary transport service on the application as well as any other information requested. If there are additions, corrections or changes, please highlight them.

All questions on the renewal application must be answered, including business structure and ownership.

Please include a Letter of Good Standing from the Department of Assessments and Taxation, requested within the past 30 days. If you have questions, please call the Department of Assessments and Taxation at 410-767-1353.

All Mortuary Transport Service Permit applications must include a completed data sheet for each registered transporter who is still with the company.

The Board does have the authority to charge a late fee if a mortuary transport permit renewal is not received by October 15, 2016. Those who do not renew before October 15, 2016 will be assessed a late fee of \$400.00 as noted in COMAR 10.29.04.02 P Fee Schedule. You may not conduct business without a valid permit. Your current permit expires on September 30th, so if you choose to renew after that date you will be operating without a permit.

The Board staff will, as required by law, review all Comptroller issues to insure they have been resolved before the Board will issue a permit. All Comptroller issues must be resolved before the Board can issue a permit. If you have issues needing resolution, please call the Office of the Comptroller at 410-649-0633, 410-649-0621 or toll free 888-614-6337.

Please remit the renewal fee and make check payable to the Board of Morticians and Funeral Directors. If you have any questions, don't hesitate to call the Board Office at 410-764-4792.

MARYLAND STATE BOARD OF MORTICIANS AND FUNERAL DIRECTORS
4201 Patterson Avenue • Baltimore, Maryland 21215 • 410-764-4792

RENEWAL APPLICATION FOR MORTUARY TRANSPORT SERVICE PERMIT

Please read: Subtitle 29 Board of Morticians and Funeral Directors, 10.29.21 Mortuary Transport Services, which became effective 2/17/2014. They are posted on the Board's website at dhmh.maryland.gov/BOM.

Authority: Health Occupations Article §§7-101 and 7-601-7-607

GENERAL INFORMATION

Mortuary Transport Service Name: _____

Address of Record: _____
(Cannot be a P.O. Box)

Mailing Address: _____

E-mail Address: _____

Phone Number: _____ Fax Number: _____

List other Licenses Issued to you by the Board or Office of Cemetery Oversight

Ownership Structure: _____ Federal Tax ID: _____

Owner: _____
SS# _____ Birth Date _____

Co-owner: _____ SS# _____ Birth Date _____

Co-owner: _____ Co-owner: _____
SS# _____ Birth Date _____ SS# _____ Birth Date _____

INSURANCE

Liability Insurance Carrier _____
Policy Number _____ (Attach copy of policy)

Motor Vehicle Insurance Carrier _____
Policy Number _____ (Attach copy of policy)

VEHICLES

<u>Make</u>	<u>Model</u>	<u>License #</u>	<u>Registration #</u>
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Please list any additional vehicles on a separate sheet of paper.

TRANSPORTERS CURRENTLY REGISTERED
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Name	Address (No PO Box)	SS#	Birth Date	E-mail
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please list any additional transporters on a separate sheet of paper.

If the permit holder is also a transporter their name must be listed as owner and also as a transporter.

FEES

Mortuary Transport Service Permit

1-3 Transporters	\$350
4-7 Transporters	\$500
8-15 Transporters	\$750
16 + Transporters	\$1,000

Transporter Registration

Please fill out a data sheet for each of your current employees that you have registered with the Board so we can adjust our records.

VEHICLE INSPECTION

Inspections will be arranged in Baltimore, Cumberland, Prince Frederick, and Cambridge.

Request for Inspection

Date and Time: _____

MARYLAND BOARD OF MORTICIANS AND FUNERAL DIRECTORS

DATA SHEET FOR REGISTERED TRANSPORTERS

SECTION I – GENERAL INFORMATION - This section must be completed in full.

A. Name of Individual: _____

B. Social Security Number: - -
(There is a statutory requirement that you disclose your social security number. It will be used for identification purposes only.)

C. Race (Please circle all applicable; for statistical purposes only): 1-White 2-Black or African American
3-American Indian or Alaska Native 4-Hispanic or Latino 5-Asian 6-Other

D. Home Address: _____

Home Phone Number: - -

E. Work Address: _____

Work Phone Number: - -

E-mail address: _____

F. Mailing Address: Which address do you wish to receive mail from the Board? (Renewal Licenses, Newsletters, etc.) (Please check one) Work: ☐ Home: ☐

G. State of Residence: _____ G. State of Employment: _____

H. Driver's License Information:

State: _____ Number: _____

I. List all Transport Companies that you are employed by:

Name of Company	Supervisor/Owner	State

CHARACTER QUESTIONS

Yes No

- | | | | |
|--------------------------|--------------------------|-----|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1) | Has the use of drugs and/or alcohol resulted in an impairment of your ability to perform the duties of a transport service? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2a) | Has any licensing or disciplinary board in any jurisdiction, or an entity of the Armed services, denied your application for licensure, reinstatement or renewal; taken any action against any license you may hold, including but not limited to, reprimand, suspension, revocation, fine or non-judicial punishment? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2b) | Have you surrendered or allowed any license to lapse while under investigation by a State MVA in any jurisdiction or an entity of the Armed Services? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3) | Are you currently under investigation or have any complaints or charges been brought against you or are currently pending, in any jurisdiction, by any licensing or disciplinary board or entity of the Armed Services? |
| <input type="checkbox"/> | <input type="checkbox"/> | 4) | Have you ever had a physical or mental illness that may presently affect or impair your ability to practice your profession? |
| <input type="checkbox"/> | <input type="checkbox"/> | 5) | Have you ever been charged with or pled guilty, nolo contendere, been convicted, received probation before judgment or other diversionary disposition of any criminal act or for driving while intoxicated, or for a controlled and dangerous substance offense (excluding minor traffic violations)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 6) | Has your employment by any funeral establishment been affected by disciplinary actions, including probation before judgment, suspension, loss of privileges, transfer to other duties, or termination of employment or contract? |
| <input type="checkbox"/> | <input type="checkbox"/> | 7) | Has any claim for damages been filed against you which is pending, has been dismissed, has been settled, or damages have been awarded against you? |

Applicant Signature

Practice of mortuary science or funeral direction without an active license is a violation of the Morticians Act. I affirm that the contents of this document are true and correct to the best of my knowledge and belief. Failure to provide truthful answers may result in disciplinary action.

Applicant Signature

Date